

A. Payments by the debtor of \$ \$200 per month for 60 months. This monthly plan payment will begin no later than 30 days following the date of the filing of the bankruptcy petition or the date of conversion to Chapter 13.

1. PLAN FUNDING AND LENGTH OF PLAN

☐ This plan contains special provisions that are not included in the standard plan as recommended by the Chapter 13 standing trustees in the Eastern District of Pennsylvania. Those provisions are set out in the OTHER PLAN PROVISIONS section of this plan.

NOTICE OF SPECIAL PROVISIONS: (Check if applicable)

☒ The debtor will seek a discharge of debts pursuant to Section 1328(a).
☐ The debtor is not eligible for a discharge of debts because the debtor has previously received a discharge described in 1328(f).

PLAN PROVISIONS DISCHARGE: (Check one)

If you oppose any provision of this plan you must file a timely written objection. This plan may be confirmed and become binding on you without further notice or hearing unless a written objection is filed before the deadline stated on the Notice issued in connection with the filing of the plan

YOUR RIGHTS WILL BE AFFECTED

☒ AMENDED PLAN

☐ ORIGINAL PLAN

(Indicate if applicable)

CASE NO 17-10625-MDC

CHAPTER 13

Debtor

GARY RICHARD GRIMM

IN RE

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

B. Mortgages and Other Direct Payments by Debtor. Payments will be made outside the plan according to the original contract terms, with no modification of contract terms and with liens retained.

* SEE INSERT
NEXT PG

Name of Creditor	Address of Creditor	Account #	Payment	Month of 1 st Payment
M & T BANK	P.O. BOX 1288 BUFFALO, NY 14240	9504960	\$ 200	AUGUST
			\$	

confirmed plan.

A. Adequate Protection Payments under Section 1326. Adequate protection payments in the following amounts will be paid by the debtor to the trustee. The trustee will disburse pre-confirmation adequate protection payments for which a proof of claim has been filed as soon as practicable after receipt of said payments from the debtor. Adequate protection payments will terminate upon confirmation of the debtor's Chapter 13 Plan, and any further payments to a creditor previously receiving adequate protection payments will be governed according to the terms of the confirmed plan.

2. SECURED CLAIMS

C. For amended plans:

(1) The plan payments by the debtor shall consist of the total amount previously paid (\$ N/A) added to the new monthly payment in the amount of \$ 0 for the remaining 0 months of the plan for a total base amount, as amended, of \$ 0, plus other payments and property stated in Paragraph B above.

(2) The payment amount shall change effective N/A.

(3) The debtor shall take appropriate action to ensure that all wage attachment payments are adjusted to conform to the terms of the amended plan.

D. The debtor is responsible for funding the plan.

Other payments from any source (describe specifically) shall be paid to the trustee as follows:
N/A

Other lump sum payments shall be paid to the trustee as follows: \$0.00

B. In addition to the above specified plan payments, the debtor agrees to dedicate to the plan the estimated amount of sale proceeds as follows: \$ N/A from the sale of property (describe property) _____. All sales will be completed by _____.

Name of Creditor	Description of Collateral	Pre-Petition Arrears to be Cured	Interest Rate	Total to be paid in plan
M&T BANK	404 ROSS ROAD KING OF PRUSSIA, PA 19406	\$ 27885.53	7.6%	\$ SEE PG 6, #6B
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$

C. Arrears

Name of Creditor	Description of Collateral	Contractual Monthly Payment	Principal Balance of Claim	Contract Rate of Interest
WSAEMC, P.O. BOX 211, NORRISTOWN, PA 19401	ACCT NO#..4594	\$	\$ 145.04	%
UPPER MERION UTIL AUTHORITY 925 HARVEST DRIVE BLUE BELL, PA 19422	ACCT NO#..0131	\$	\$ 4,126.00	%
R&R PROPERTIES 837 SWEDE STREET NORRISTOWN, PA 19401	ACCT NO#..0132	\$	\$ 21,729.00	%
INTERNAL REVENUE SERVICE	ACCT NO#..7099,	\$	\$ 30,610.55	%
MUN. OF NORRISTOWN, 235 EAST AIRY ST NORRISTOWN, PA, 19401,	ACCT NO#..1936	\$	\$ 411.30	%

*SEE NEXT PG

4

	N/A
Name of Creditor	Description of Collateral to be Surrendered

F. Surrender of Collateral:

N/A				
Name of Creditor	Description of Collateral	Principal Balance of Claim	Interest Rate	Total to be paid in plan

E. Other Secured Claims:

N/A					
Name of Creditor	Description of Collateral	Modified Principal Balance	Interest Rate	Total Payment	Plan* or Adversary Action

D. Secured Claims Paid According to Modified Terms. These amounts will be paid in the plan according to modified terms, and liens retained until entry of discharge. The excess of the creditor's claim will be treated as an unsecured claim. Any claim listed as "NO VALUE" in the "Modified Principal Balance" column below will be treated as an unsecured claim. A MOTION AND/OR AN ADVERSARY ACTION, AS APPROPRIATE SHALL BE FILED UNDER SECTION 506(a) TO DETERMINE THE EXTENT, VALIDITY, AND PRIORITY OF THE LIEN.

Name of Creditor	Reason for Special Classification	Amount of Claim	Interest Rate	Total Payment
PECO ENERGY	SEE PG 6, #6C	\$ 2617.28	N/A %	\$ 2617.28
		\$	%	\$

in full:

A. Claims of Unsecured Non-Priority Creditors Specially Classified. Includes unsecured claims, such as co-signed unsecured debts, that will be paid in full even though all other unsecured claims may not be paid

4. UNSECURED CLAIMS

B. Administrative Claims: (1) Trustee fees. Percentage fees payable to the trustee will be paid at the rate fixed by the United States Trustee, not to exceed 10%.
(2) Attorney Fees. In addition to the retainer of \$ _____ already paid by the debtor, the amount of \$ _____ in the plan.

Name of Creditor	Total Payment
N/A	\$
	\$
	\$
	\$

1322(a)(4).

A. Allowed unsecured claims entitled to priority under section 507 will be paid in full with the exception of certain assigned Domestic Support Obligations that may be paid less than 100% pursuant to section

3. PRIORITY CLAIMS

Name of Creditor	Description of Collateral
N/A	

522(F):

G. Lien Avoidance: The debtor moves to avoid the liens of the following creditors pursuant to Section

6. OTHER PLAN PROVISIONS:

A. Debtor will be BEING IN A ROOMATE

B. Debtor plans on applying for reverse mortgage as debt on property is LESS THAN 1/2 of value.

C. Debtor is applying to LIHEAP and other hardship assistance programs for funds.

D. Debtor will be APPLYING FOR SS BENEFITS

E.

F.

G.

H.

I.

Name of Creditor	Reason for Special Classification	Amount of Claim	Interest Rate	Total Payment
N/A		\$	%	\$
		\$	%	\$

5. EXECUTORY CONTRACTS AND UNEXPIRED LEASES.

A. The following executory contracts and unexpired leases are assumed (and pre-petition arrears to be cured in the plan) or rejected (so indicate):

C. Funding (check one)

☐ Pro Rata

☐ 100%

B. Claims of General Unsecured Creditors. The debtor estimates that a total of \$ N/A will be available for distribution to unsecured creditors. The debtor calculates that a minimum of \$ must be paid to unsecured creditors in order to comply with the liquidation test for confirmation and the debtor calculates that a minimum of \$ must be paid to unsecured, non-priority creditors in order to comply with the Means Test.

1. All pre-petition arrears and cramdowns shall be paid to the trustee and disbursed to creditors through the plan.
2. If a pre-petition creditor files a secured, priority or specially classified claim after the bar date, the trustee will treat the claim as allowed, subject to objection by the debtor. Claims filed after the bar date that are not properly served on the trustee will not be paid. The debtor is responsible for reviewing claims and filing objections, if appropriate.
3. In the event that any creditor in any class refuses any disbursement from the standing trustee, the standing trustee shall be authorized to disburse those funds to other creditors in the same class, or if all such similarly classified creditors have already been paid, to other creditors in the next level of priority, without seeking a modification of the plan.
4. If debtor is successful in obtaining a recovery in any personal injury or other litigation in which debtor is the plaintiff during the term of this plan, any such recovery in excess of any applicable exemption will be paid to the trustee as a special plan payment, in addition to debtor's regular plan payments, for the benefit of the unsecured creditors.

GENERAL PRINCIPLES APPLICABLE TO ALL PLANS

☒ Property of the estate will vest in the debtor upon closing of the case.

☐ Property of the estate will vest in the debtor upon confirmation

8. REVESTING OF PROPERTY (CHECK ONE)

If the above Levels are not filled-in, then the order of distribution of plan payments will be determined by the trustee using the following as a guide:

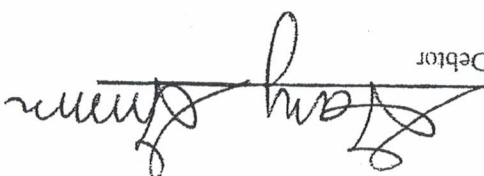
Level 1: Adequate protection payments.
 Level 2: Domestic Support Obligations.
 Level 3: Debtor's attorney's fees.
 Level 4: Priority claims, pro rata.
 Level 5: Secured claims, pro rata.
 Level 6: Specially classified unsecured claims.
 Level 7: General unsecured claims.
 Level 8: Untimely filed unsecured claims to which the debtor has not objected.

Level 8:
 Level 7:
 Level 6:
 Level 5:
 Level 4:
 Level 3:
 Level 2:

Level 1: M&T BANK

Payments from the plan will be made by the trustee in the following order:

7. ORDER OF DISTRIBUTION:

Debtor

Attorney for Debtor

Dated: 9/5/17

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employer's name

Employer's address

How long employed there? 40 YRS

City State ZIP Code

City State ZIP Code

Number Street

Number Street

Employment status

☒ Employed ☐ Not employed

☐ Employed ☐ Not employed

Debtor 1

Debtor 2 or non-filing spouse

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Check if this is:

☒ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

Schedule I: Your Income

Official Form 1061

12/15

MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1

GARY RICHARD GRIMM

Debtor 2 (Spouse, if filing)

First Name Middle Name Last Name

First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of Pennsylvania

Case number 17-10625 (if known)

See Attached

13. Do you expect an increase or decrease within the year after you file this form?
☒ Yes. Explain:
☐ No.

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.

Combined monthly income

\$ 1,322.30

11. + \$ 1,322.30

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

11. State all other regular contributions to the expenses that you list in Schedule J.

10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

8h. Other monthly income. Specify:

8g. Pension or retirement income

Specify:

8f. Other government assistance that you regularly receive that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

8e. Social Security

8d. Unemployment compensation

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive. Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8b. Interest and dividends

8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8. List all other income regularly received:

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.

5h. Other deductions. Specify:

5g. Union dues

5f. Domestic support obligations

5e. Insurance

5d. Required repayments of retirement fund loans

5c. Voluntary contributions for retirement plans

5b. Mandatory contributions for retirement plans

5a. Tax, Medicare, and Social Security deductions

5. List all payroll deductions:

Copy line 4 here

4. →

\$ 1,485.00

For Debtor 2 or non-filing spouse

For Debtor 1

21. Other. Specify: _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

22a.	\$	1,260.67
22b.	\$	0.00
22c.	\$	1,260.67

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

23a.	\$	1,322.30
23b.	-\$	1,260.67
23c.	\$	61.63

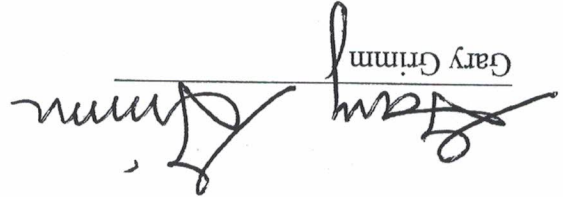
24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: Upon the removal of liens that should no longer be on Debtors home in King of Prussia, debtor will be applying for a reverse mortgage. The debtor has in excess of 50% equity in the property and is over 65 years of age. As hearings must be scheduled for 2 of the liens, 1 which must follow the other, The debtor expects that legal process to take a minimum of 6 months.


Gary Grimm

Sincerely,

Debtor will be applying for Social Security benefits within the next 4 months. Presently, debtor quality's for \$1340 a month at full retirement age, December 20, 2017, per Social Security Administration records. Their records are not complete. The Administration did not include income for years where debtor's income did not require his filing taxes. Additionally debtor's benefit calculations do not include his x-wife's income of 17 years which should be included in debtor's income calculations. Her income was in excess of 15 times debtor's income for those 17 years. This will increase Debtors monthly payment considerably. The exact amount will have to be calculated by the Administration.

Also, upon completion of some repairs to the property, hopefully by year's end, debtors plans to bring in a roommate to his home in King of Prussia. Comparable rentals in the area would put the unit's value at a minimum of \$500 per month.

RE: Schedule I
Subject-Item 13 responses

US Bankruptcy Court
Eastern District of Pennsylvania
900 Market St # 400
Philadelphia, PA 19107

Gary Grimm
837 Swede Street
Norristown, Pa. 19401
610-275-5855
garygrimm@hotmail.com

September 5, 2017

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

4a. \$ 202.17
4b. \$ 48.00
4c. \$ 40.00
4d. \$ 0.00

4. \$ 775.00

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

Part 2: Estimate Your Ongoing Monthly Expenses

3. Do your expenses include expenses of people other than yourself and your dependents?
☒ No
☐ Yes

2. Do you have dependents?
☒ No
☐ Yes. Fill out this information for each dependent.

Do not list Debtor 1 and Debtor 2.
Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2
Dependent's age
Does dependent live with you?

1. Is this a joint case?
☒ No. Go to line 2.
☐ Yes. Does Debtor 2 live in a separate household?
☒ No
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

Part 1: Describe Your Household

Schedule J: Your Expenses

Official Form 106J

Fill in this information to identify your case:

Debtor 1	GARY	RICHARD	GRIMM
First Name	Middle Name	Last Name	
Debtor 2			
First Name	Middle Name	Last Name	
(Spouse, if filing)			
First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:			
Case number (if known)			17-10625

Check if this is:
☒ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:
MM / DD / YYYY

20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	20a. Mortgages on other property	\$ 0.00
		20b. Real estate taxes	\$ 0.00
		20c. Property, homeowner's, or renter's insurance	\$ 0.00
		20d. Maintenance, repair, and upkeep expenses	\$ 0.00
		20e. Homeowner's association or condominium dues	\$ 0.00
19.	Other payments you make to support others who do not live with you.		\$ 0.00
	Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106J).		\$ 0.00
		17a. Car payments for Vehicle 1	\$ 0.00
		17b. Car payments for Vehicle 2	\$ 0.00
		17c. Other. Specify:	\$ 0.00
		17d. Other. Specify:	\$ 0.00
17.	Installment or lease payments:		\$ 0.00
	Specify:		
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		\$ 0.00
		15a. Life insurance	\$ 0.00
		15b. Health insurance	\$ 0.00
		15c. Vehicle insurance	\$ 0.00
		15d. Other insurance. Specify:	\$ 0.00
15.	Insurance.		\$ 0.00
		Do not include insurance deducted from your pay or included in lines 4 or 20.	
14.	Charitable contributions and religious donations		\$ 0.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books		\$ 20.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		\$ 0.00
11.	Medical and dental expenses		\$ MEDICAID* 5.00
10.	Personal care products and services		\$ 5.00
9.	Clothing, laundry, and dry cleaning		\$ 0.00
8.	Childcare and children's education costs		\$ 0.00
7.	Food and housekeeping supplies		\$ SNAP* (\$124) +10.00
		6a. Electricity, heat, natural gas	\$ LIHEAP* 83.00
		6b. Water, sewer, garbage collection	\$ 42.50
		6c. Telephone, cell phone, Internet, satellite, and cable services	\$ 0.00
		6d. Other. Specify:	\$ 0.00
6.	Utilities:		\$ 0.00
5.	Additional mortgage payments for your residence, such as home equity loans		\$ 0.00
Your expenses			

Debtor 1

GARY

RICHARD

GRIMM

Case number (if known) 17-10625

Upon the removal of liens that should no longer be on Debtors home in King of Prussia, debtor will be applying for a reverse mortgage. The debtor has in excess of 50% equity in the property and is over 65 years of age. As hearings must be scheduled for 2 of the liens, 1 which must follow the other, The debtor expects that legal process to take a minimum of 6 months.

☒ Yes.
☐ No.

24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

23c. \$ 61.63

23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.

23b. \$ 1,260.67

23b. Copy your monthly expenses from line 22c above.

23a. \$ 1,322.30

23a. Copy line 12 (your combined monthly income) from Schedule I. 23. Calculate your monthly net income.

22a. \$ 1,260.67
22b. \$ 0.00
22c. \$ 1,260.67

22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22. Calculate your monthly expenses.

21. +\$ 0.00

21. Other. Specify:

Debtor 1 GARY RICHARD GRIMM

Case number (if known) 17-10625

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1.00

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 639

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Chapter 13 Calculation of Your Disposable Income

Official Form 122C-2

04/16

☒ Check if this is an amended filing

Fill in this information to identify your case:

Debtor 1	GARY	First Name	RICHARD	Middle Name	GRIMM	Last Name
Debtor 2		First Name		Middle Name		Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number (if known) 17-10625

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$

\$ 775.00

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

9c. Net mortgage or rent expense.

9b. Total average monthly payment

\$ 775.00

Copy here

Repeat this amount on line 33a.

\$ 775.00

Average monthly payment

Name of the creditor

9b. Total average monthly payment for all mortgages and other debts secured by your home.
To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

\$ 1912

9. Housing and utilities - Mortgage or rent expenses:

8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

\$ 1290

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

■ Housing and utilities - Insurance and operating expenses
■ Housing and utilities - Mortgage or rent expenses

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

Local Standards

You must use the IRS Local Standards to answer the questions in lines 8-15.

7g. Total. Add lines 7c and 7f.

\$ 0.00

Copy here

7f. Subtotal. Multiply line 7d by line 7e.

\$ 0.00

Copy here

\$ 0.00

7e. Number of people who are 65 or older

X 1

7d. Out-of-pocket health care allowance per person \$ 0.00

People who are 65 years of age or older

7c. Subtotal. Multiply line 7a by line 7b.

\$ 0.00

Copy here

\$ 0.00

7b. Number of people who are under 65

X 1

7a. Out-of-pocket health care allowance per person \$ 0.00

People who are under 65 years of age

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

0. Go to line 14.
1. Go to line 12.
2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1: Describe Vehicle 1: _____

13a. Ownership or leasing costs using IRS Local Standard _____ \$ 0.00

13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1 _____

Average monthly payment _____ \$

Total average monthly payment _____ \$

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0.

13c. Net Vehicle 1 ownership or lease expense _____ \$

Vehicle 2: Describe Vehicle 2: _____

13a. Ownership or leasing costs using IRS Local Standard _____ \$ 0.00

13b. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2 _____

Average monthly payment _____ \$

Total average monthly payment _____ \$

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0.

13c. Net Vehicle 2 ownership or lease expense _____ \$

13d. Ownership or leasing costs using IRS Local Standard _____ \$ 0.00

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2 _____

Average monthly payment _____ \$

Total average monthly payment _____ \$

Subtract line 13e from line 13d. If this number is less than \$0, enter \$0.

13f. Net Vehicle 2 ownership or lease expense _____ \$

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* allowance regardless of whether you use public transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

By law, the court must keep the nature of these expenses confidential.

27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

\$ 0.00

26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).

\$ 0.00

Do you actually spend this total amount?
☐ No. How much do you actually spend?
☐ Yes

\$ 0.00

\$ 0.00

25. Health insurance, disability insurance, and health savings accounts that are reasonably necessary for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

Additional Expense Deductions

Add lines 6 through 23.

24. Add all of the expenses allowed under the IRS expense allowances.

\$ 4158

Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, cell waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.

\$ 0.00

22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.

\$ 0.00

21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.

\$ 0.00

20. Education: The total monthly amount that you pay for education that is either required:
■ as a condition for your job, or
■ for your physically or mentally challenged dependent child if no public education is available for similar services.

\$ 0.00

19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.

\$ 20.00

18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.

\$ 0.00

17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.

\$ 0.00

16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.

\$ 296.70

Other Necessary Expenses
In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

Chapter 13 Calculation of Your Disposable Income

Official Form 122C-2

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

33a. Copy line 9b here. 775.00

33b. Copy line 13b here. 0.00

33c. Copy line 13c here. 0.00

33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ <u>0.00</u>
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ <u>0.00</u>
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ <u>0.00</u>

33e. Total average monthly payment. Add lines 33a through 33d. 775.00

32. Add all of the additional expense deductions. Add lines 25 through 31. 0.00

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization, 11 U.S.C. § 548(d)(3) and (4). Do not include any amount more than 15% of your gross monthly income. 0.00

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary. 0.00

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42 per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. 0.00

28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

☐ No. Go to line 35.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
		\$ = + 60 =	
		\$ = + 60 =	
		\$ = + 60 =	

35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. \$ + 60 = \$

36. Projected monthly Chapter 13 plan payment.

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense \$ 0.00

37. Add all of the deductions for debt payment. Add lines 33e through 36.

\$ 0.00

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances \$ 7158

Copy line 32, All of the additional expense deductions \$ 0.00

Copy line 37, All of the deductions for debt payment \$ 0.00

Total deductions \$ 7158

Copy total here \$ 7158

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input checked="" type="checkbox"/> 122C-1	ROOMMATE			<input checked="" type="checkbox"/> Increase	\$ 500.00
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Part 3: Change in Income or Expenses

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

44. Total adjustments. Add lines 40 through 43.

43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and documentation for the expenses.

42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here.

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).

40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.

39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

Debtor 1
First Name GARY
Middle Name RICHARD
Last Name GRIMM
Case number (if known) 17-10625

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

Signature of Debtor 1 *Gary Grim* *
Date 09/05/2017 MM / DD / YYYY

Signature of Debtor 2 _____
Date _____ MM / DD / YYYY

Sign Below

Part 4:

Debtor 1

GARY

RICHARD

GRIMM

Case number (if known) 17-10625

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Fill in this information to identify your case:

Debtor 1		Debtor 2		Case number	
First Name	Middle Name	First Name	Middle Name	17-10625MDC	(if known)
GARY	RICHARD				
Last Name		Last Name		United States Bankruptcy Court for the Eastern District of Pennsylvania	
GRIMM					

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.

\$ 337,500.00

1b. Copy line 62, Total personal property, from Schedule A/B.

\$ 129,240.00

1c. Copy line 63, Total of all property on Schedule A/B.

\$ 466,740.00

Part 2: Summarize Your Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.

\$ 94,394.70

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.

\$

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.

\$

Your total liabilities

\$ 94,394.70

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.

\$ 1323.30

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.

\$ 1260.67

Part 4: Answer These Questions for Administrative and Statistical Records																						
6. Are you filing for bankruptcy under Chapters 7, 11, or 13? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.																						
7. What kind of debt do you have? <input checked="" type="checkbox"/> Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. <input type="checkbox"/> Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.																						
8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. <div style="border: 1px solid black; padding: 5px; width: 150px; float: right;">\$ 1785</div>																						
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: <div style="background-color: #cccccc; padding: 5px; margin-bottom: 5px;">Total claim</div> <div style="background-color: #cccccc; padding: 5px; margin-bottom: 5px;">From the Statement of Your Current Monthly Income. Copy the following:</div> <table border="0" style="width: 100%;"><tr><td style="width: 40%;">9a. Domestic support obligations (Copy line 5a.)</td><td style="width: 10%; text-align: right;">\$</td><td style="width: 50%; border-bottom: 1px solid black;">0.00</td></tr><tr><td>9b. Taxes and certain other debts you owe the government (Copy line 6b.)</td><td style="text-align: right;">\$</td><td style="border-bottom: 1px solid black;">55,860.34</td></tr><tr><td>9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)</td><td style="text-align: right;">\$</td><td style="border-bottom: 1px solid black;">0.00</td></tr><tr><td>9d. Student loans. (Copy line 6f.)</td><td style="text-align: right;">\$</td><td style="border-bottom: 1px solid black;">0.00</td></tr><tr><td>9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</td><td style="text-align: right;">\$</td><td style="border-bottom: 1px solid black;">0.00</td></tr><tr><td>9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)</td><td style="text-align: right;">\$</td><td style="border-bottom: 1px solid black;">0.00</td></tr><tr><td>9g. Total. Add lines 9a through 9f.</td><td style="text-align: right;">\$</td><td style="border-bottom: 1px solid black; border: 1px solid black;">55,860.34</td></tr></table>		9a. Domestic support obligations (Copy line 5a.)	\$	0.00	9b. Taxes and certain other debts you owe the government (Copy line 6b.)	\$	55,860.34	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00	9d. Student loans. (Copy line 6f.)	\$	0.00	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$	0.00	9g. Total. Add lines 9a through 9f.	\$	55,860.34
9a. Domestic support obligations (Copy line 5a.)	\$	0.00																				
9b. Taxes and certain other debts you owe the government (Copy line 6b.)	\$	55,860.34																				
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00																				
9d. Student loans. (Copy line 6f.)	\$	0.00																				
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00																				
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$	0.00																				
9g. Total. Add lines 9a through 9f.	\$	55,860.34																				

Official Form 122C-1 Chapter 13 Statement of Current Monthly Income and Calculation of Commitment Period

1. What is your marital and filing status? Check one only.

☐ Married. Fill out both Columns A and B, lines 2-11.

☐ Not married. Fill out Column A, lines 2-11.

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions):

3. Alimony and maintenance payments. Do not include payments from a spouse.

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.

5. Net income from operating a business, profession, or farm

Gross receipts (before all deductions) \$ 0.00

Ordinary and necessary operating expenses - \$ 0.00

Net monthly income from a business, profession, or farm \$ 0.00

6. Net income from rental and other real property

Gross receipts (before all deductions) \$ 0.00

Ordinary and necessary operating expenses - \$ 0.00

Net monthly income from rental or other real property \$ 0.00

Column A Debtor 1

Column B Debtor 2 or non-filing spouse

Part 1: Calculate Your Average Monthly Income

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case, 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Official Form 122C-1

Fill in this information to identify your case:

Debtor 1 GARY RICHARD GRIMM

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number (if known) 17-10625

Check as directed in lines 17 and 21:

☒ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

☐ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

☐ 3. The commitment period is 3 years.

☐ 4. The commitment period is 5 years.

☒ Check if this is an amended filing

Official Form 122C-1
Chapter 13 Statement of your current monthly income and calculation of commitment period

15b. The result is your current monthly income for the year for this part of the form.

15a. Copy line 14 here →

15. Calculate your current monthly income for the year. Follow these steps:

14. Your current monthly income. Subtract the total in line 13 from line 12.

13. Calculate the marital adjustment. Check one:

☐ You are married and your spouse is filing with you. Fill in 0 below.

☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

Total

12. Copy your total average monthly income from line 11.

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

Total amounts from separate pages, if any.

10. Income from all other sources not listed above. Specify the source and amount.

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

8. Interest, dividends, and royalties

7. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you

For your spouse

Column A Debtor 1

Column B Debtor 2 or non-filing spouse

Total average monthly income

If you checked 17a, do NOT fill out or file Form 122C-2.
If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Date MM/DD/YYYY

Date 09/05/2017

Signature of Debtor 2

Signature of Debtor 1

By signing here, under penalty of perjury, I declare that the information on this statement and in any attachments is true and correct.

Part 4: Sign Below

21. How do the lines compare?
- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3.
- ☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4.

20b. The result is your current monthly income for the year for this part of the form.

20. Calculate your current monthly income for the year. Follow these steps:

19b. Subtract line 19a from line 18.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you intend that the amount from line 13, calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy

18. Copy your total average monthly income from line 11.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

- 17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).
- 17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).

17. How do the lines compare?

16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

16b. Fill in the number of people in your household.

16a. Fill in the state in which you live.

16. Calculate the median family income that applies to you. Follow these steps:

Debtor 1 First Name GARY Middle Name RICHARD Last Name GRIMM

Case number (if known) 17-10625

If you checked 17a, do NOT fill out or file Form 122C-2.
If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Date MM / DD / YYYY

Date 09/05/2017

Signature of Debtor 2

Signature of Debtor 1

By signing here, under penalty of perjury, I declare that the information on this statement and in any attachments is true and correct.

Part 4: Sign Below

21. How do the lines compare?

- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3.
The commitment period is 3 years. Go to Part 4.
☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4.

20b. The result is your current monthly income for the year for this part of the form.

20a. Calculate your current monthly income for the year. Follow these steps:

19b. Subtract line 19a from line 18.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

18. Copy your total average monthly income from line 11.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

17. How do the lines compare?

- ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).
☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).
On line 39 of that form, copy your current monthly income from line 14 above.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live.

16b. Fill in the number of people in your household.

\$ 50,501.00

1
PA

Case number (if known) 17-10625

Debtor 1 RICHARD GRIMM

GARY

Debtor 2